## Certified Peer Support Specialist Application Instructions

Dear Peer Support Specialist Applicant,

Thank you for your interest in Peer Support Specialist certification through the Department of Health and Welfare Division of Behavioral Health (DBH). The life experience of someone living with a mental illness or co-occurring diagnosis is best understood by someone who has also walked a similar journey. Professional certification lends credibility to the individual professional and ensures quality services are received by the individual in care. You are commended on your commitment to quality mental health services by seeking certification.

Throughout the certification process you may have many questions, so feel free to contact our office at any time. We are here to help you!

You are allowed **one year** from the completion of your training course to seek certification and submit an application for certification with all required documentation. If you are unable to meet this timeframe, you will need to submit a new application. If you have some of the requirements but have not completed your supervised work/volunteer experience, then submit an application and certification may be granted for a one- time only six- month period until the supervision hours are completed.

To efficiently move through this process, follow these steps:

- Read this letter thoroughly
- Review the certification Frequently Asked Questions (FAQ) page and visit
  the website at
  <a href="http://healthandwelfare.idaho.gov/Medical/MentalHealth/PeerSpecialistsFamilySupportPartners/tabid/2935/Default.aspx">http://healthandwelfare.idaho.gov/Medical/MentalHealth/PeerSpecialistsFamilySupportPartners/tabid/2935/Default.aspx</a> so you are familiar with the requirements, process, and the Code of Ethics.
- Complete the attached application either electronically or handwritten
  using blue or black ink. Save your application and/or print a copy then
  either submit the application electronically to
  PeerSpecCert@dhw.idaho.gov or mail your application to:

Division of Behavioral Health 450 W. State St. 3<sup>rd</sup> floor Boise, ID 83702

Attn: Peer Support Specialist Certification Oversight Committee

 Refer to the check list in the application to ensure that you are submitting all the required documentation.

Make sure the following are submitted with your complete application with signatures.

- Work/Experience Summary
- Education Experience Summary
- Code of Ethics affidavit
- Copy of your certificate of attendance
- Copy of your Letter of Notification from your training with JANUS (formerly Mountain States)

Once we have received your completed application, you will be notified by mail or email that you application has been received and/or if there are additional documents needed. If your application is complete upon initial review, then it will be reviewed by the Peer Support Specialist Certification Oversight committee for final processing. Within thirty days of initial receipt, you will receive either a certificate and letter in the mail or a letter stating reasons for denial and your rights to file a grievance regarding the decision.

If you were granted full certification, it is valid for one year. If you were granted a six-month certificate, your six-month certificate and letter will indicate when your six-month certificate will lapse. If you have a six-month certificate, it is your responsibility to submit the remaining requirements to be granted for the remaining six-months for a total of a year. It is your responsibility to keep track of your recertification date; no reminders will be sent. When it is time to recertify, you will need to go to:

http://healthandwelfare.idaho.gov/Medical/MentalHealth/PeerSpecialistsFamilySupportPartners/tabid/2935/Default.aspx and complete your re-certification application. This includes documenting your continuing education/training hours earned during the last certification period. The re-certification application must be postmarked on or before the expiration date as shown on your certificate.

If your application is not complete and received by the date shown on your certificate, any Peer Support services provided may not be reimbursable due to your Certification being invalid.

If you are applying for certification through reciprocity because you were previously certified, you must submit a complete application for Certified Peer Support Specialist, and provide documentation that:

 You completed the Idaho approved curriculum and passed the exam prior to July1, 2015. If your training was not the Idaho approved training, please

- provide documentation of the training you received and the training/certifying organization or agency so that it can be verified.
- Please provide documentation of your Peer Support Specialist work/volunteer experience documenting continued practice of your skills as a Peer Support Specialist in the application.
- Complete the Statement of Personal Experience in the application
- Provide documentation of any Continuing Education/training hours in the application you have received since your certification and before submission of this application.
- Complete an Education Experience Summary
- Complete a Code of Ethics Affidavit

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If the DBH finds that your application for reciprocity is deficient for Idaho's requirements, a letter explaining needed requirements will be sent to you. You may be granted a one-time only six-month certificate following review of your complete application for reciprocity.

If you were previously certified, your certification will only be valid until December 31, 2015, unless you apply for certification through the DBH certification process. Any billing or work provided may not be reimbursed without the Idaho certification for Peer Support Specialist.

If you disagree with the outcome of your application for certification, you are able to file a grievance.

Please submit in writing your grievance to:

Division of Behavioral Health 450 W. State St. 3<sup>rd</sup> floor Boise, ID 83702 Attn: Candace Falsetti, QA Program Manager PeerSpecCert@dhw.idaho.gov

Submit your valid factual reason for disputing the action you deem unjustified. Your grievance will be registered and reviewed and you will receive a response that your written grievance was received. A decision for your grievance will be made within 60 days of receipt. All decisions made on a submitted grievance are final.

Should you have questions, please feel free to contact us at: 208-639-5720 Thank you again for your interest in becoming a Certified Peer Support Specialist in Idaho.